| Application or | Docket | Number |
|----------------|--------|--------|
|----------------|--------|--------|

PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | SMALL TYPE | ENTITY | OR | OTHER SMALL | | | | |
|---|--|-------------|----------------------------------|------------|------|--|------------------|--------------------|-------------------|------------------------|---------------------|---------------------|------------------------|
| FOR | | | | R FILED | | | ſ | RATE | FEE |) | RATE | FEE | |
| BASIC FEE | | | | | | · · · · · · · · · · · · · · · · · · · | | | 11/11/2 | 345.00 | OR | HAIL | 690.00 |
| TOTAL CLAIMS /7 minus 20= | | | | | * | | | X\$ 9= | / | OR | X\$18= | | |
| INDEPENDENT CLAIMS | | | | | | ı | X39= | 39 | OR | X78= | | | |
| MULTIPLE DEPENDENT CLAIM PRESENT | | | | | | | | +130= | / | OR | +260= | | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | L | TOTAL | 364 | OR | TOTAL | | | |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) | | | | | | | | | SMALL | ENTITY | OR | OTHER SMALL I | |
| AMENDMENT A | | REM AF | AIMS AINING TER IDMENT, | | PF | HIGHEST NUMBER REVIOUSLY PAID FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | A D TIONAL FEE |
| NON | Total | * | 17 | Minus | ** | 20, | = | | X\$ 9= | | OR | X\$18= | |
| AME | Independent | * NTATIC | N OF M | Minus | PEN | | = / | | X39= | (| OR | X78= (| |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | +130= | | OR | +260= | IIVAV | |
| | | | | | | | A | TOTAL DDIT. FEE | | OR | TOTAL ADDIT. FEE | A | |
| | | | umn 1) | T | | Column 2) | (Column 3) | | | | | | |
| ENT B | | REM AF | AIMS AINING TER IDMENT | | PF | HIGHEST NUMBER REVIOUSLY PAID FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADAL TIONAL FEE |
| AMENDMENT | Total | * | | Minus | ** | | = | | X\$ 9= | | OR | X\$18= | |
| 4ME | Independent | * | - | Minus | *** | | = | | X39= | | OR | X78= | |
| | FIRST PRESE | NTATIC | N OF M | JLTIPLE DE | PENE | DENT CLAIM | | \vdash | | | On | | |
| | | | | | | | | L | +130= | | OR | +260= | |
| | TOTAL OR TOTAL ADDIT. FEE | | | | | | | | | | | | |
| | | | ımn 1) AIMS | 1 | | Column 2) | (Column 3) | | | | _ | | |
| AMENDMENT C | | REM. AF | AINING TER DMENT | | PF | HIGHEST NUMBER REVIOUSLY PAID FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| NDN | Total | * | | Minus | ** | | = | ſ | X\$ 9= | | OR | X\$18= | |
| AME. | Independent | * | | Minus | *** | | = | | X39= | | ŀ | X78= | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | ┢ | | | OR | | | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. | | | | | | L | +130= | | OR | +260= | | | |
| ** | ** If the "Lighant Number Proviously Boid For" IN TUIC CRACE is less than 00 anter "00." | | | | | | | AD | TOTAL DIT. FEE | | OR A | TOTAI ADDIT. FEE | |
| The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | | | | |